

## CLAIMS ONLY

Application Number

Filing Date

**Applicant(s)**

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		2				
4		1				
5		1				
6		1				
7		2				
8		2				
9		1				
10		1				
11		1				
12		1				
13		2				
14		1				
15	1					
16		1				
17		1				
18	1					
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49						
50						
Total Indep	3					
Total Depend	17					
Total Claims	20					

May be used for additional claims or amendments

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						